

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90178 049 ****61.25

DOCUMENT # 713597

1. Entity Name
CYPRESS LAKE EAST #4, INC.



Principal Place of Business
**711 S.E. 7TH AVENUE
POMPAÑO BEACH FL 33060**

Mailing Address
**711 S.E. 7TH AVENUE
POMPAÑO BEACH FL 33060**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1224770**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**INGRAM, DONALD C
711 SE 7TH AVE
POMPAÑO BEACH FL 33060**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **INGRAM DONALD C. (P.O.)**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD INGRAM, DONALD C 711 SE 7TH AVE #B1 POMPAÑO BEACH FL 33060	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RODER, RUDY 711 SE 7TH AVE #4 POMPAÑO BEACH FL 33060	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LESNIEWSKI, ANTHONY 711 SE 7TH AVE #7 POMPAÑO BEACH FL 33060	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GREIG, NANCY 711 SE 7TH AVE #6 POMPAÑO BEACH FL 33060	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FINN, PATRICIA 711 SE 7TH AVE #5 POMPAÑO BEACH FL 33060	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FINN PATRICIA 711 SE 7TH AVE. #5 POMPAÑO BEACH FL 33060	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAJEWSKI, FRANK 711 SE 7TH AVE. #3 POMPAÑO BEACH FL 33060	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ANTHONY LESNIEWSKI** 2-19-03 954-782-7397

CR2E037 (10/02)